

PSJ17 Exh 59

1 IN THE UNITED STATES DISTRICT COURT
2 FOR THE NORTHERN DISTRICT OF OHIO
3 EASTERN DIVISION

4 IN RE: NATIONAL PRESCRIPTION) No. 17-md-2804
5 OPIATE LITIGATION NO. 2804)
6)
7 APPLIES TO ALL CASES) Hon. Dan A. Polster
8)

9 HIGHLY CONFIDENTIAL - SUBJECT TO
10 FURTHER CONFIDENTIALITY REVIEW

11 VIDEO DEPOSITION OF LAURA SIPPIAL

12 January 22, 2019
13 10:00 a.m.

14 Reporter: John Arndt, CSR, CCR, RDR, CRR
15 CSR No. 084-004605
16 CCR No. 1186

1 DEPOSITION OF LAURA SIPPAL produced,
2 sworn, and examined on January 22, 2019, at Lindhorst &
3 Dreidame, 312 Walnut Street, Suite 3100, in the City of
Cincinnati, State of Ohio, before John Arndt, a
Certified Shorthand Reporter and Certified Court
Reporter.

4
5 APPEARANCES OF COUNSEL
6

On Behalf of Plaintiffs:

7 Wagstaff & Cartmell LLP
4740 Grand Avenue, Suite 300
8 Kansas City, MO 64112
(816) 701-1174

9 BY: MR. ANDREW N. FAES
afaes@wcllp.com
10 MR. LUKE F. CALLAHAN
lcallahan@wcllp.com
11

Robbins Geller Rudman & Dowd, LLP
12 655 West Broadway, Suite 1900
San Diego, CA 92101
13 (619) 231-1058

BY: MS. KOMAL JAIN
14 kjain@rgrdlaw.com

15 On Behalf of Walmart:

Jones Day
16 901 Lakeside Avenue
Cleveland, OH 44114
17 (216) 586-3939

BY: MS. PATRICIA OCHMAN
18 pochman@jonesday.com

19 On Behalf of Endo Pharmaceuticals:

Arnold & Porter Kaye Scholer, LLP
20 777 South Figueroa Street, 44th Floor
Los Angeles, CA 90017
21 (213) 243-4000

BY: MS. TIFFANY M. IKEDA
22 tiffany.ikeda@arnoldporter.com
(present via speakerphone)
23
24

1 APPEARANCES OF COUNSEL (CONTINUED)

2

On Behalf of AmerisourceBergen:

3

Reed Smith LLP
136 Main Street, Suite 250
Princeton, NJ 08540
(609) 514-5959

5

BY: MS. SHANA E. RUSSO
srusso@reedsmith.com

6

(present via speakerphone)

7

On Behalf of Cardinal Health:

8

Porter Wright Morris & Arthur LLP
250 East Fifth Street, Suite 2200
Cincinnati, OH 45202
(513) 369-4203

9

BY: MR. ZACHARY A. EL-SAWAF
zelsawaf@porterwright.com

10

11 On Behalf of Teva Pharmaceutical:

12

Morgan, Lewis & Bockius, LLP
1111 Pennsylvania Avenue, NW
Washington, DC 20004
(202) 739-5806

13

BY: MR. JONATHAN E. MAIER
jonathan.maier@morganlewis.com
(present via speakerphone)

14

15

On Behalf of Laura Sippial:

16

Lindhorst & Dreidame, Co., LPA
312 Walnut Street, Suite 3100
Cincinnati, OH 45202
(513) 223-3967

17

18

19

20

BY: MR. CULLEN P. ROONEY

21

22

23

Also present: James Arndt, videographer

24

Shawn Groat, trial technician

1 talked -- you can say that we met, but --

2 A. Okay. We met, yes.

3 Q. (By Mr. Faes) So yeah, I don't -- I
4 should have cautioned you. I don't want to get into
5 any communications that you had between yourself and
6 your attorney. I'm just -- I was just asking --

7 A. Yes.

8 Q. -- did you meet, how long did you meet
9 for. I don't want to hear anything substantive that
10 you discussed with your attorney.

11 A. Okay.

12 Q. Did you review any documents in
13 preparation for your deposition today?

14 A. No.

15 Q. And did you review any deposition
16 testimony in preparation for today?

17 A. No.

18 Q. And how long did you all meet for,
19 approximately?

20 A. About 45 minutes to an hour.

21 Q. What's your highest level of education?

22 A. I have a bachelor's degree.

23 Q. In?

24 A. Business management.

1 Q. And who is your current employer?

2 A. I am currently unemployed.

3 Q. Who was your last employer?

4 A. My last employer was R & L Laboratory
5 Services.

6 Q. And when did you leave that job?

7 A. I would say in June or July of this year.

8 Q. And what were the circumstances of your
9 departure from R & L Laboratory Services?

10 A. Well, I had multiple sclerosis, and so I
11 left to pursue, I guess you could say, short -- or
12 Social Security disability.

13 Q. Now, you first started with Cephalon in
14 approximately January or February of 2001?

15 A. Yes.

16 Q. And you left Cephalon when?

17 A. 2010.

18 Q. When in 2010 did you leave Cephalon?

19 A. I don't recall.

20 Q. Was it -- do you remember if it was early,
21 late in the year?

22 A. I think it was like middle of the year.

23 Q. So was it summertime?

24 A. No, I think it was fall.

1 Q. So fall -- approximately fall of 2010 to
2 the best of your recollection --

3 A. Yes.

4 Q. -- is when you left Teva?

5 A. Yes.

6 Q. And when you were --

7 A. Left Cephalon.

8 Q. I'm sorry. Cephalon. That's right. It
9 was never Teva when you were there.

10 A. Right.

11 Q. So what were the circumstances of your
12 departure from Cephalon in 2010?

13 A. I was fired.

14 Q. And what was the reason why you were told
15 you were fired to the --

16 A. I was told I was fired because I stated
17 that I had not completed a medical education program
18 when the physician who was involved said that I had.

19 Q. So let me understand if I see this --
20 understand this correctly. When you say you were fired
21 because you stated that you had not completed a medical
22 education program and the doctor said you had, does
23 that mean that it was a medical education program for a
24 drug you were promoting, and this doctor that said it

1 specialist; right?

2 A. Yes. Often.

3 Q. And you would also ultimately call on
4 other types of physicians other than oncologists and
5 pain specialists as well; right?

6 A. Repeat that question.

7 Q. And you would call on physicians with
8 other types of specialties other than just oncologists
9 and pain specialists; right?

10 MR. MAIER: Object to form.

11 A. Yes.

12 Q. (By Mr. Faes) You might, for example,
13 call on primary care providers; right?

14 A. No, not primary care.

15 Q. So you don't remember ever having --

16 A. I don't --

17 Q. -- a primary care doctor as one of your
18 even top targets for Actiq or Fentora?

19 MR. MAIER: Object to form.

20 A. Maybe.

21 MR. ROONEY: Don't guess.

22 A. Okay. I'm not sure.

23 Q. (By Mr. Faes) So I'm not sure I got an
24 answer, so let me ask it. Is it true that you would

1 occasionally call on -- strike that. Is it true that
2 you would sometimes call on doctors with specialties
3 other than oncology or pain specialists for Actiq and
4 Fentora?

5 MR. ROONEY: Object to form.

6 A. Yes.

7 Q. (By Mr. Faes) And the company knew that
8 you were doing that; right?

9 MR. ROONEY: Object to form.

10 A. Yes.

11 Q. (By Mr. Faes) And nobody ever expressed
12 any kind of concern to you that calling on doctors who
13 weren't oncologists or pain specialists was
14 inconsistent with the risk minimization plan; right?

15 MR. ROONEY: Object to form.

16 MR. MAIER: Object to form.

17 A. Repeat that.

18 Q. (By Mr. Faes) Nobody at Cephalon -- none
19 of your superiors ever came to you or told you that
20 they had any concerns with you calling on doctors for
21 Actiq who weren't pain specialists or oncologists;
22 right?

23 MR. ROONEY: Same objection.

24 MR. MAIER: Object to form.

1 A. There were physicians with subspecialties
2 that we called on.

3 MR. ROONEY: Look at the question he
4 asked.

5 A. Okay.

6 MR. ROONEY: Just answer the question.

7 A. No.

8 Q. (By Mr. Faes) So if you look back on
9 Exhibit Number 2, if you look down on Paragraph 5, it
10 states that among those physicians who are prescribing
11 Actiq, activity is skewing increasingly towards
12 non-oncologists. Units written by oncologists
13 represent just 16 percent of total usage with 48
14 percent coming from pain management specialists. Do
15 you see that?

16 A. Yes.

17 Q. And that was something that you were
18 trained on and had an understanding early on when you
19 began promoting Actiq; right?

20 MR. ROONEY: Object to form.

21 MR. MAIER: Objection. Form.

22 A. Not early on.

23 Q. (By Mr. Faes) But eventually you had that
24 understanding?

1 A. Yes.

2 Q. When did you come to have that
3 understanding?

4 A. Maybe a couple years into working for --
5 MR. ROONEY: Don't guess.

6 A. Okay. Two years.

7 Q. (By Mr. Faes) So to the best of your
8 recollection, within a couple years of working for
9 Cephalon, you started to have an understanding that
10 among physicians who were prescribing Actiq, activity
11 was skewing increasingly towards the non-oncologist;
12 right?

13 A. Yes.

14 Q. And an oncologist is essentially a cancer
15 specialist; right?

16 A. Correct.

17 Q. And if you look on Number 6, it states
18 that we believe the pain management specialist is
19 likely to be a more aggressive writer and rapid adopter
20 of Actiq; right?

21 A. Yes.

22 Q. Is that something that you were trained on
23 during your initial training and on-boarding with
24 Cephalon?